Case 8:18-bk-14049-ES Doc 11 Filed 11/18/18 Entered 11/18/18 21:06:31 Desc

	Main Duci	IIIIEIIL Paue I 01 42	
rmation to identify your	case:		
Shar E. Kanamou	ie		
First Name	Middle Name	Last Name	
Rachel Kanamou	ie		
First Name	Middle Name	Last Name	
Bankruptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA	
8:18-bk-14049-ES			
	Shar E. Kanamou First Name Rachel Kanamou First Name Bankruptcy Court for the:	Shar E. Kanamouie First Name Middle Name Rachel Kanamouie First Name Middle Name Rachel Kanamouie First Name Middle Name CENTRAL DISTRICT O	Shar E. Kanamouie First Name Middle Name Last Name Rachel Kanamouie First Name Middle Name Last Name Bankruptcy Court for the: CENTRAL DISTRICT OF CALIFORNIA

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)		,
١.	1a. Copy line 55, Total real estate, from Schedule A/B	\$	1,350,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	45,734.8
	1c. Copy line 63, Total of all property on Schedule A/B	\$	1,395,734.8
Par	t 2: Summarize Your Liabilities		
			liabilities int you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	1,257,972.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	236,847.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	498,200.18
	Your total liabilities	\$	1,993,019.19
⊃ar	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	10,396.08
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	13,144.1
⊃ar	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other s	chedules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Case 8:18-bk-14049-ES Doc 11 Filed 11/18/18 Entered 11/18/18 21:06:31 Desc

Main Document Page 2 of 42

Debtor 1 Shar E. Kanamouie Debtor 2 Rachel Kanamouie Case number (if known) 8:18-bk-14049-ES

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

13,400.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	236,847.01
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	236,847.01

	Case	8:18-DK-14		OC II	Filed 11/18/18 Entere 2-2 <u>Document Page 3 of</u>	a 11/18/1	8 21:06:	31 Desc
Fill	in this informa	ation to identify	your case and th					
Del	otor 1	Shar E. Kan	amouie					
		First Name		Name	Last Name			
	otor 2	Rachel Kana						
(Spo	ouse, if filing)	First Name	Middle	Name	Last Name			
Uni	ted States Bank	cruptcy Court for	the: CENTRAL	DISTRI	CT OF CALIFORNIA			
Cas	se number 8:	18-bk-14049-l	ES					☐ Check if this is an amended filing
		m 106A/E : A/B: P i	_					12/15
hink nfor Ansv	k it fits best. Be a mation. If more s wer every question	as complete and space is needed, on.	accurate as possibl attach a separate sł	e. If two neet to t	only once. If an asset fits in more than o married people are filing together, both a his form. On the top of any additional pag Estate You Own or Have an Interest In	re equally resp	onsible for su	pplying correct
. D	o you own or hav	ve any legal or ed	uitable interest in a	ny resid	lence, building, land, or similar property?			
	No. Go to Part 2	<u>.</u>						
	Yes. Where is the	he property?						
1.1	32162 Calle	Los Elegante	16	wnat	t is the property? Check all that apply			
		t address, if available, or other description			Single-family home Duplex or multi-unit building Condominium or cooperative	the amoun	of any secured	ims or exemptions. Put diclaims on Schedule D: ns Secured by Property.
	San Juan Capistrano	CA	92675-0000			Current va	erty?	Current value of the portion you own?
	City	State	ZIP Code		Investment property Timeshare Other	Describe t		\$1,350,000.00 our ownership interest ancy by the entireties, or
				Who	has an interest in the property? Check one Debtor 1 only		e), if known.	,,
	Orange				Debtor 2 only			
	County				Debtor 1 and Debtor 2 only	■ Checl	r if this is com	munity property
					At least one of the debtors and another		structions)	manity property
					r information you wish to add about this i erty identification number:	tem, such as lo	cal	

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here......=>

\$1,350,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

☐ Yes. Describe.....

page 2

	Case 8:18-bl	<-14049-ES	Doc 11 File		Entered 11/18 e 5 of 42	/18 21:06:	:31 I	Desc
Debtor 1 Debtor 2					Case number	(if known) 8:1	8-bk-14	1049-ES
Exam ■ No	musical instrur	raphic, exercise, and	d other hobby equipm	ent; bicycles, pool	tables, golf clubs, skis;	; canoes and k	ayaks; ca	arpentry tools;
■ No	mples: Pistols, rifles,	shotguns, ammuniti	on, and related equip	ment				
□ No	mples: Everyday clot	hes, furs, leather co	ats, designer wear, sh	noes, accessories				
		Location: 32162 92675 Miscellaneous c	Calle Los Elegant Iothing	es, San Juan C	apistrano CA			\$1,000.0
□ No	mples: Everyday jew	Location: 32162 92675	y, engagement rings, Calle Los Elegant ewelry-wedding ri	es, San Juan C	irloom jewelry, watches	s, gems, gold, s	ilver	\$5,000.00
Exal ■ No	farm animals mples: Dogs, cats, bi	rds, horses						
■ No	-	-	ou did not already li	st, including any	health aids you did n	ot list		
			from Part 3, includi		r pages you have atta 	ched		\$16,000.00
	Describe Your Financi own or have any le		erest in any of the fo	llowing?			portion Do not d	value of the you own? deduct secured or exemptions.

16. **Cash** *Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No

■ Yes.....

D	ebtor 2 Rachel K	anamouie		Case number (f known) 0:10-DK-14049-E3
				Cash Location: 32162 Cal Los Elegantes San Juan Capistran CA 92675	o ****
17	institutio	g, savings, oı		unts; certificates of deposit; shares in credit unions, bro with the same institution, list each.	kerage houses, and other similar
	□ No ■ Yes			Institution name:	
	_ 100	•		California Bank & Trust	
		17.1.	Checking	Acct xxx3186	\$2,000.00
18	Bonds, mutual fund Examples: Bond fur ■ No	nds, investme		kerage firms, money market accounts	
19		d stock and	interests in incorpo	rated and unincorporated businesses, including an	interest in an LLC, partnership, and
	Yes. Give specific		about themne of entity:	 % of ownershi	p:
20	Negotiable instrume	ents include p truments are to information a	ersonal checks, cas hose you cannot tra	tiable and non-negotiable instruments niers' checks, promissory notes, and money orders. nsfer to someone by signing or delivering them.	
21	. Retirement or pens Examples: Interests ☐ No	sion account	s	03(b), thrift savings accounts, or other pension or profit-	sharing plans
	Yes. List each acc		ely. of account:	Institution name:	
		401(k)	Sprint 401K Plan Fidelity Brokerage Services LLC	\$10,734.84
22	Examples: Agreeme	used deposit	s you have made so	that you may continue service or use from a company public utilities (electric, gas, water), telecommunications	companies, or others
	■ No □ Yes			Institution name or individual:	
23	Annuities (A contract No	ct for a period	dic payment of mone	y to you, either for life or for a number of years)	
	☐ Yes	Issuer nam	e and description.		
24	. Interests in an educ 26 U.S.C. §§ 530(b)(■ No			ialified ABLE program, or under a qualified state tu	ition program.
	Yes	Institution r	ame and description	. Separately file the records of any interests.11 U.S.C.	§ 521(c):

Debtor 1

Case 8:18-bk-14049-ES Doc 11 Filed 11/18/18 Entered 11/18/18 21:06:31 Main Document Page 7 of 42 Debtor 1 Shar E. Kanamouie Case number (if known) 8:18-bk-14049-ES **Rachel Kanamouie** Debtor 2 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

☐ Yes. Describe each claim.......

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

☐ Yes. Describe each claim.......

35. Any financial assets you did not already list

■ No

☐ Yes. Give specific information..

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	tor 1 tor 2	Shar E. Kanamouie Rachel Kanamouie	Main Document	Page 8	Of 42 Case number (if known)	8:18-bk-14049-ES
36.		he dollar value of all of your ent art 4. Write that number here				\$14,734.84
Part	5: Des	scribe Any Business-Related Proper	ty You Own or Have an Interest In. L	ist any real esta	ate in Part 1.	
37. D	o you c	own or have any legal or equitable in	terest in any business-related prope	erty?		
	No. Go	to Part 6.				
	Yes. G	so to line 38.				
Part		scribe Any Farm- and Commercial Fi ou own or have an interest in farmland,		Have an Interes	st In.	
46. [Do you	own or have any legal or equita	ıble interest in any farm- or con	nmercial fishin	ng-related property?	
	No.	Go to Part 7.				
	☐ Yes.	Go to line 47.				
		-				
Part	7:	Describe All Property You Own or	Have an Interest in That You Did No	t List Above		
53. [Do you	have other property of any kind	I you did not already list?			
		oles: Season tickets, country club n				
	No					
	Yes.	Give specific information				
54.	Add t	he dollar value of all of your ent	ries from Part 7. Write that num	ber here		\$0.00
Part	8:	List the Totals of Each Part of this F	·orm		ı	
55.	Part 1	: Total real estate, line 2				\$1,350,000.00
56.	Part 2	2: Total vehicles, line 5		\$15,000.00		
57.	Part 3	: Total personal and household	items, line 15	\$16,000.00		
58.	Part 4	: Total financial assets, line 36		\$14,734.84		
59.	Part 5	i: Total business-related propert	y, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related	property, line 52	\$0.00		
61.	Part 7	: Total other property not listed	, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 t	hrough 61	\$45,734.84	Copy personal property to	stal \$45,734.84
63.	Total	of all property on Schedule A/B	. Add line 55 + line 62			\$1,395,734.84

Official Form 106A/B Schedule A/B: Property page 6

Case 8:18-bk-14049-ES Doc 11 Filed 11/18/18 Entered 11/18/18 21:06:31

		Wall Doc	THERE I due 5 of 42		
Fill in this infor	mation to identify your	case:			
Debtor 1	Shar E. Kanamou	ie			
	First Name	Middle Name	Last Name		
Debtor 2	Rachel Kanamou	e			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA		
Case number	8:18-bk-14049-ES				
(if known)		_		☐ Check if this is amended filing	

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the

	emption to a particular dollar amount and the he applicable statutory amount.	e value of the propert	y is d	etermined to exceed that amoun	t, your exemption would be limited					
Pa	rt 1: Identify the Property You Claim as E	xempt								
1.	Which set of exemptions are you claiming?	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	■ You are claiming state and federal nonbank	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)						
	☐ You are claiming federal exemptions. 11 L	You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.						
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption					
		Copy the value from Schedule A/B								
	32162 Calle Los Elegantes San Juan Capistrano, CA 92675 Orange	\$1,350,000.00		\$98,033.00	C.C.P. § 704.730					
	County Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit						
	2013 Audi Q5	\$15,000.00			C.C.P. § 704.010					
	Location: 32162 Calle Los Elegantes, San Juan Capistrano CA 92675			100% of fair market value, up to any applicable statutory limit						
	Daugther's car. Daugther makes payment. Debtor is co-buyer only for purposes of the loan. Line from Schedule A/B: 3.1									
	Location: 32162 Calle Los Elegantes, San Juan Capistrano CA 92675	\$10,000.00		\$10,000.00	C.C.P. § 704.020					
	Miscellaneous Furnishing, couches, dining set, refrigerator, stove, beds Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit						

\$1,000.00

Location: 32162 Calle Los Elegantes,

San Juan Capistrano CA 92675 Miscellaneous clothing

Line from Schedule A/B: 11.1

C.C.P. § 704.020

\$1,000.00

100% of fair market value, up to

any applicable statutory limit

Case 8:18-bk-14049-ES Doc 11 Filed 11/18/18 Entered 11/18/18 21:06:31 Desc Main Document Page 10 of 42

Shar E. Kanamouie Debtor 1 8:18-bk-14049-ES **Rachel Kanamouie** Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Location: 32162 Calle Los Elegantes, C.C.P. § 704.040 \$5,000.00 \$5,000.00 San Juan Capistrano CA 92675 Miscellaneous Jewelry-wedding 100% of fair market value, up to rings, bracelet any applicable statutory limit Line from Schedule A/B: 12.1 Cash C.C.P. § 704.070 \$2,000.00 \$2,000.00 Location: 32162 Calle Los Elegantes, San Juan Capistrano CA 92675 100% of fair market value, up to Line from Schedule A/B: 16.1 any applicable statutory limit Checking: California Bank & Trust C.C.P. § 704.070 \$2,000.00 \$2,000.00 Acct xxx3186 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit 401(k): Sprint 401K Plan C.C.P. § 704.115(a)(1) & (2), \$10,734.84 \$10.734.84 Fidelity Brokerage Services LLC Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No П Yes

Case 8:18-bk-14049-ES Doc 11 Filed 11/18/18 Entered 11/18/18 21:06:31 Desc

		Main Document	Page ?	11 of 42		
Fill in this inform	ation to identify yοι	ır case:				
Debtor 1	Shar E. Kanamo	ouie				
	First Name		st Name		-	
Debtor 2	Rachel Kanamo	ouie				
(Spouse if, filing)	First Name	Middle Name Las	st Name		-	
United States Ban	kruptcy Court for the	: CENTRAL DISTRICT OF CALIFOR	NΙΔ			
Office Glates Barr	intraptor Court for the	OLIVINAL DIGITATO I GALIFOR			-	
Case number 8	:18-bk-14049-ES					
(if known)					☐ Check	if this is an
					amend	led filing
o =	4000					
Official Form	106D					
Schedule I	D: Creditors	Who Have Claims Se	cured	by Propert	V	12/15
		If two married people are filing together, boot, number the entries, and attach it to the				
number (if known).		,		,,	pg, ,	
1. Do any creditors I	have claims secured by	y your property?				
☐ No. Check	this box and submit t	his form to the court with your other sch	edules. You	u have nothing else t	to report on this form.	
■ Voc. Fill in	all of the information	holow		ŭ	•	
		below.				
Part 1: List All	Secured Claims			Calumn A	Calumn B	Column C
		more than one secured claim, list the creditor		Column A	Column B	
		s a particular claim, list the other creditors in P cal order according to the creditor's name.	'art 2. As	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	a the claime in alphabet	oar oraor accoraming to the oroanor o marine.		value of collateral.	claim	If any
<i>7</i> -	n Chase Bank	B		\$6,005.00	\$15,000.00	\$0.00
Creditor's Name		Describe the property that secures the c	laim:	φυ,υυσ.υυ	φ13,000.00	φυ.υυ
Creditor's Name		2013 Audi Q5				
		Location: 32162 Calle Los Elegantes, San Juan Capistrano	~ C^			
		92675	JCA			
		32010				
		Daugther's car. Daugther make	s			
		payment. Debtor is co-buyer o				
		for purposes of the loan.				
P O Box 9	01038	As of the date you file, the claim is: Check apply.	k all that			
Fort Worth	n, TX 76101	☐ Contingent				
Number, Street,	City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the del	ot? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as mortg	gage or secu	red		
Debtor 2 only		car loan)				
Debtor 1 and Del	btor 2 only	☐ Statutory lien (such as tax lien, mechani	ic's lien)			
At least one of th	e debtors and another	☐ Judgment lien from a lawsuit				
■ Check if this cla	im relates to a	Other (including a right to offset)	rchase M	oney Security		
community deb	ot					
But tild and		Lord A. Politon of a control of a control	0000			
Date debt was incu	rred <u>2013</u>	Last 4 digits of account number	3300			
2.2 Mr. Coope		Describe the property that secures the c		\$862,756.00	\$1,350,000.00	\$0.00
Creditor's Name		32162 Calle Los Elegantes San	Juan			
		Capistrano, CA 92675 Orange				
		County As of the date you file, the claim is: Check	k all that			
	ess Water Blvd	apply.				
Coppell, T		Contingent				
Number, Street,	City, State & Zip Code	☐ Unliquidated				
Who ower the del	at? Charles and	Disputed				
Who owes the del	or Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortgoing car loan)	gage or secu	red		
Debtor 2 only		our rourry				

Official Form 106D

Debtor 1 Shar E. Kanamouie		Case number (if known) 8:18-bk-14049-ES					
First Name Middle N	ame Last Name	_					
Debtor 2 Rachel Kanamouie							
First Name Middle N	ame Last Name						
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)					
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit						
■ Check if this claim relates to a community debt	Other (including a right to offset)	First Mortg	age				
Date debt was incurred 11/2000	Last 4 digits of account num	ber <u>2660</u>					
2.3 Wells Fargo Home Equity	Describe the property that secures	the claim:	\$389,211.00	\$1,350,000.00	\$0.00		
Creditor's Name	32162 Calle Los Elegantes S Capistrano, CA 92675 Oran County						
P O Box 6995 Portland, OR 97228	As of the date you file, the claim is: apply.	Check all that					
	☐ Contingent						
Number, Street, City, State & Zip Code	☐ Unliquidated☐ Disputed						
Who owes the debt? Check one.	Nature of lien. Check all that apply.						
☐ Debtor 1 only	☐ An agreement you made (such as	mortgage or sec	ured				
Debtor 2 only	car loan)	mortgago or oco	urou				
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)					
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit						
Check if this claim relates to a community debt	Other (including a right to offset)	Second Mo	rtgage				
Date debt was incurred 4/8/2002	Last 4 digits of account num	ber <u>9272</u>					
Add the dellar value of very entries in O	talium A an thia nama Waita that milimata	har hara.	¢4 257 072	000			
Add the dollar value of your entries in C If this is the last page of your form, add Write that number here:			\$1,257,972 \$1,257,972				
Part 2: List Others to Be Notified for	or a Debt That You Already Listed	l					
Use this page only if you have others to be trying to collect from you for a debt you of than one creditor for any of the debts that debts in Part 1, do not fill out or submit the	we to someone else, list the creditor t you listed in Part 1, list the additiona	in Part 1, and th	en list the collection age	ency here. Similarly, if you have	e more		
Name, Number, Street, City, State & Quality Loan Service Corpo		On whic	h line in Part 1 did you ent	er the creditor? _2.2_			
411 Ivy Street San Diego, CA 92101		Last 4 d	igits of account number	58BF_			

		Doc 11 Filed 11/18/1 Main Document Pa	8 Eni ae 13 (8 21:06:31	Desc
3111	in this information to identify your case:	Main Document Pa	ue 13 (JI 42		
Deb	stor 1 Shar E. Kanamouie First Name Mic	ddle Name Last Name	e			
Deb	otor 2 Rachel Kanamouie					
(Spot	use if, filing) First Name Mid	ddle Name Last Name	Э			
Unit	red States Bankruptcy Court for the: CENTR	RAL DISTRICT OF CALIFORNIA				
Cas	e number 8:18-bk-14049-ES					
(if kno					☐ Check	if this is an
					amend	ed filing
)ffi	icial Form 106E/F					
	hedule E/F: Creditors Who Ha	ave Unsecured Claim	S			12/15
	s complete and accurate as possible. Use Part 1 fo			r creditors with NON	PRIORITY claims. Li	
iche iche eft. <i>A</i>	executory contracts or unexpired leases that could dule G: Executory Contracts and Unexpired Lease dule D: Creditors Who Have Claims Secured by Pra Attach the Continuation Page to this page. If you he and case number (if known).	es (Official Form 106G). Do not inclu roperty. If more space is needed, co	ide any cree py the Part	ditors with partially s you need, fill it out,	ecured claims that a number the entries in	re listed in the boxes on the
Part	t1: List All of Your PRIORITY Unsecured	Claims				
1.	Do any creditors have priority unsecured claims a	ngainst you?				
	□ No. Go to Part 2.					
	Yes.					
i I	List all of your priority unsecured claims. If a credi identify what type of claim it is. If a claim has both pric possible, list the claims in alphabetical order accordin Part 1. If more than one creditor holds a particular cla	ority and nonpriority amounts, list that og g to the creditor's name. If you have m	laim here a	nd show both priority a	nd nonpriority amount	s. As much as
((For an explanation of each type of claim, see the inst	tructions for this form in the instruction	booklet.)	Total claim	Priority	Nonpriority
]			****	amount	amount
2.1	Nelnet Inc	Last 4 digits of account number	5778	\$236,847.0 1	\$236,847.01	\$0.00
	Priority Creditor's Name					
	121 South 13th Street Lincoln, NE 68508	When was the debt incurred?	2013		-	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check a	II that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	☐ Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
	\square At least one of the debtors and another	☐ Domestic support obligations				
	Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the	government		
	Is the claim subject to offset?	Claims for death or personal inj	ury while yo	u were intoxicated		
	■ No	Other. Specify				
	Yes	Student Lo	an			
Part	t 2: List All of Your NONPRIORITY Unsec	ured Claims				
3.	Do any creditors have nonpriority unsecured clair					
	☐ No. You have nothing to report in this part. Submit	t this form to the court with your other s	schedules.			
	Yes.	, ,				
	— 165.					

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

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8:18-bk-14049-ES Debtor 2 Rachel Kanamouie Case number (if known) 4.1 **AFC CAL LLC** Last 4 digits of account number 7114 \$89,376.03 Nonpriority Creditor's Name LAW OFFICES OF GARY A BEMIS When was the debt incurred? 2015 3870 La Sierra Ave Suite 239 Riverside, CA 92505 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Line of credit-Collections ☐ Yes 4.2 NextGear Capital, Inc 4445 \$375,000.00 Last 4 digits of account number Nonpriority Creditor's Name Prenovost, Normandin, Berg & When was the debt incurred? 2013 2122 North Broadway Suite 200 Santa Ana, CA 92706 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ■ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Line of Credit ☐ Yes 4.3 Wells Fargo Bank Last 4 digits of account number 1889 \$18,320.00 Nonpriority Creditor's Name PO Box 6995 When was the debt incurred? 2018 Portland, OR 97228 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Student loans Check if this claim is for a community debt $oxed{\square}$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Line on Checking Account ☐ Yes

Debtor 1 Shar E. Kanamouie

	Rachel K			Case n	umber (if known)	8:18-bk-14049-	ES		
	Wescom Cr		Last 4 digits of account number	5095	5		\$13,835.68		
	Nonpriority Cred 123 S Marei	ngo Ave	When was the debt incurred?	1993	3				
_		City State ZIp Code	As of the date you file, the claim	ı is: Chec	k all that apply				
	Debtor 1 onl	the debt? Check one.							
			☐ Contingent						
	Debtor 2 onl	,	☐ Unliquidated						
	Debtor 1 and	· ·	☐ Disputed						
	☐ At least one	of the debtors and another	Type of NONPRIORITY unsecure	ed claim:					
		s claim is for a community	Student loans						
	debt Is the claim su	bject to offset?	☐ Obligations arising out of a sep report as priority claims	paration a	greement or divorce	that you did not			
	No		Debts to pension or profit-shar	ing plans,	and other similar de	ebts			
	☐ Yes		Other. Specify Credit car	d purch	nases				
4.5	Wescom Cr	redit Union	Last 4 digits of account number	9094	l		\$1,668.47		
	Nonpriority Cred 123 S Marei	ditor's Name ngo Ave	When was the debt incurred?	2013			<u> </u>		
	Pasadena, (CA 91101 City State Zlp Code	As of the date you file the eleimon	ia. Obse	l II 4b - 4 b .				
		the debt? Check one.	As of the date you file, the claim	is: Chec	к ан тлат арріу				
	Debtor 1 onl								
	■ Debtor 2 onl	•	Contingent						
	_	•	☐ Unliquidated						
	Debtor 1 and	•	Disputed						
	_	of the debtors and another	Type of NONPRIORITY unsecure	ed claim:					
		s claim is for a community	Student loans						
	debt Is the claim su	bject to offset?	☐ Obligations arising out of a sepreport as priority claims			•			
	No		Debts to pension or profit-shar	ing plans,	and other similar de	ebts			
	☐ Yes		■ Other. Specify Line of cre	edit					
Part 3:	List Others	s to Be Notified About a D	ebt That You Already Listed						
is tryin have m	g to collect fro nore than one c	m you for a debt you owe to	l about your bankruptcy, for a debt that someone else, list the original creditor nat you listed in Parts 1 or 2, list the add or submit this page.	in Parts 1	or 2, then list the	collection agency here	e. Similarly, if you		
	d Address		On which entry in Part 1 or Part 2 did yo	u list the o	original creditor?				
	& Levin		Line 4.1 of (Check one):	Part 1:	Creditors with Prior	ity Unsecured Claims			
		nia Street Suite 14	I	Part 2:	Creditors with Nonp	oriority Unsecured Claim	ıs		
mulana	apolis, IN 46	32 0 4	Last 4 digits of account number	7	114				
Part 4:	Add the Ar	mounts for Each Type of l	Jnsecured Claim						
	he amounts of unsecured cla		aims. This information is for statistical	reporting	g purposes only. 28	8 U.S.C. §159. Add the	amounts for each		
					Total	Claim			
	6a. otal	Domestic support obligatio	ns	6a.	\$	0.00			
cla from Pa	ims art 1 6b.	Taxes and certain other del	ots you owe the government	6b.	\$	236,847.01			
	6c.		al injury while you were intoxicated	6c.	\$	0.00			
	6d.	•	nsecured claims. Write that amount here.	6d.	\$	0.00			
	60	Total Priority Add lines 6a th	prough 6d	60	¢	226 947 04			

Debtor 1 Shar E. Kanamouie

Debtor 2 Rachel Kanamouie

Case number (if known)

8:18-bk-14049-ES

				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 498,200.18
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 498,200.18

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		Mulli Doca	HCHL LUGC II OLTZ	
Fill in this info	ormation to identify your	case:		
Debtor 1	Shar E. Kanamou	ıie		
	First Name	Middle Name	Last Name	
Debtor 2	Rachel Kanamou	ie		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	CENTRAL DISTRICT O	F CALIFORNIA	
Case number	8:18-bk-14049-ES			
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1			<u> </u>		
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					<u></u>
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_

Case 8:18-bk-14049-ES Doc 11 Filed 11/18/18 Entered 11/18/18 21:06:31 Desc

		Main Doc	ument Page 18	of 42	
Fill in thi	is information to identify your				
Debtor 1	Shar E. Kanamou	ıie			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, f	Rachel Kanamou First Name	Middle Name	Last Name		
United St	tates Bankruptcy Court for the:	CENTRAL DISTRICT	OF CALIFORNIA		
Case nur	mber 8:18-bk-14049-ES			_	
(if known)					Check if this is an amended filing
Officia	al Form 106H				
Sche	dule H: Your Cod	ebtors			12/15
eople ar ill it out, our nam 1. Do	re filing together, both are equand number the entries in the le and case number (if known) by you have any codebtors? (If	ally responsible for su boxes on the left. Atta . Answer every questic	oplying correct information the Additional Page to on.	n. If more space is r this page. On the to	ate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
U N ✓ Y					
	ithin the last 8 years, have you ona, California, Idaho, Louisiana				
	o. Go to line 3. es. Did your spouse, former spo No Y Yes.	use, or legal equivalent l	ive with you at the time?		
	In which community stat Rachel Kanamouie, 321 Name of your spouse, former sp Number, Street, City, State & Zij	62 Calle Los Elegantes, ouse, or legal equivalent	CA San Juan Capistrano, CA	Fill in the name a 	nd current address of that person.
in lir Forn	ne 2 again as a codebtor only	if that person is a guara	intor or cosigner. Make si	ire you have listed t	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1	Natasha Kanamouie			✓ Schedule D, lir	ne 2.1
	Name				line
	32162 Calle Los Elegantes San Juan Capistrano, CA 92675			Schedule G, lir	ne
	Number Street City	State	ZIP Code		
3.2	Name				ne line
				_	ne
	Number Street	Otata	710.0		
	City	State	ZIP Code		

Fill in this information to identify your case:	
Debtor 1 Shar E. Kanamouie	
Debtor 2 Rachel Kanamouie (Spouse, if filing)	
United States Bankruptcy Court for the: CENTRAL DISTRIC	CT OF CALIFORNIA
Case number (If known) 8:18-bk-14049-ES	Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter
Official Form 106I	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	1: Describe Employment				
1.	Fill in your employment information.		Debtor	1	Debtor 2 or non-filing spouse
	If you have more than one job, attach a separate page with	Employment status*	■ Emp	ployed	■ Employed
	information about additional		☐ Not	employed	☐ Not employed
	employers.	Occupation	self-er	nployed	Regional Account Mgr
	Include part-time, seasonal, or self-employed work.	Employer's name	Presti	ge Motor Imports	Sprint
	Occupation may include student or homemaker, if it applies.	Employer's address	Suite 1	V. Imperial Highway 100 CA 92821	6591 Irvine Center Drive, Suite 100 Irvine, CA 92618
		How long employed th	ere?	38 yrs	12 yrs
				*See Attachment for Additi	onal Employment Information

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 7,400.00 6,000.00 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. +\$ 0.00 0.00 Calculate gross Income. Add line 2 + line 3. 6,000.00 7,400.00

	otor 1 otor 2	Shar E. Kanamouie Rachel Kanamouie	_		Case	number (if known)	_	8:18-b	k-140)49-E	s	
					Foi	r Debtor 1		For Do			•	
	Cop	by line 4 here	4.		\$	6,000.00	<u>-</u>	\$	7,	400.0	0	
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	5a	a.	\$	0.00)	\$	1.	389.4	.9	
	5b.	Mandatory contributions for retirement plans	5b		\$	0.00	_	\$		746.6		
	5c.	Voluntary contributions for retirement plans	50		\$	0.00	_	\$		0.0		
	5d.	Required repayments of retirement fund loans	50	d.	\$	0.00	_	\$		80.8		
	5e.	Insurance	5e	€.	\$	0.00	_	\$		576.9		
	5f.	Domestic support obligations	5f		\$	0.00)	\$		0.0	0	
	5g.	Union dues	50	j.	\$	0.00)	\$		0.0	0	
	5h.	Other deductions. Specify: PerUse	5h	1.+	\$	0.00	<u> </u>	\$		210.0	0	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	0.00)	\$	3,	003.9	2	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	6,000.00	<u> </u>	\$	4,	396.0	8	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88	a.	\$	0.00	1	\$		0.0	ın	
	8b.	Interest and dividends	8b		\$	0.00	_	\$		0.0		
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	c .	\$	0.00	-)	\$		0.0	_	
	8d.	Unemployment compensation	80	d.	\$	0.00)	\$		0.0	0	
	8e.	Social Security	86	€.	\$	0.00)	\$		0.0	0	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	e 8f 8g		\$_ \$_	0.00	_	\$ 		0.0		
	8h.	Other monthly income. Specify:		ر. ۱.+	\$	0.00	_	·		0.0		
9.		d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	— ° 9.	Γ	* <u> </u>	0.00	_ 	\$			00	
				L			<u> </u>	<u> </u>				
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		6,000.00 +	5	4,39	6.08	= \$	10.	396.08
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.								L		
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not exify:	depe			•			hedule 11.			0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certaillies							12.	\$	10,	396.08
13.	Do '	you expect an increase or decrease within the year after you file this form	?						ι	Comb		l ncome
		No.	•									
	П	Yes. Explain:										

Debtor 1 Debtor 2 Rachel Kanamouie Case number (if known) 8:18-bk-14049-ES

Official Form B 6l Attachment for Additional Employment Information

Spouse		
Occupation	Activities Coordinator	
Name of Employer	Casa De Amma	
How long employed	1 1/2 yrs	7
Address of Employer	27231 Calle Arroyo	
	San Juan Capistrano, CA 92675	

Official Form 106I Schedule I: Your Income page 3

FIII	in this info	rmation to identify yo	ur case:					
Deb	tor 1	Shar E. Kana	ımouie				ck if this is:	
Deb	tor 2	Rachel Kana	mouie				An amended filing A supplement show	ving postpetition chapter
	ouse, if filing		modic				13 expenses as of	
Unit	ed States B	ankruptcy Court for the:	CENTR	AL DISTRICT OF CALIFO	RNIA	-	MM / DD / YYYY	
Cas	e number	8:18-bk-14049-E	S					
(If k	nown)							
O	fficial l	Form 106J						
So	chedu	le J: Your I	Exper	ises				12/1
Be info	as comple ormation.	ete and accurate as	possible. eded, atta	If two married people ar				
Par	t 1: De	escribe Your House	hold					
1.	Is this a	joint case?						
		to to line 2.						
	■ Yes. I	Does Debtor 2 live i	n a separa	ate household?				
		■ No ☑ Yes. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expen</i> ses	for Separate House	ehold of Deb	tor 2.	
2.	Do you l	nave dependents?	□ No					
	Do not lis Debtor 2	st Debtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not st	tate the						■ No
		nts names.			Son		21	☐ Yes
								□ No
								☐ Yes
								□ No □ Yes
								☐ Yes
								☐ Yes
3.	•	expenses include		No				
	•	es of people other the and your depender		Yes				
Dar	· 0.		M	5				
exp	imate you	of a date after the b	our bankru	y Expenses uptcy filing date unless y y is filed. If this is a supp				
Inc	lude expe	nses paid for with r	non-cash	government assistance i	f vou know			
the	value of s	such assistance and		luded it on Schedule I: Y			Your expe	enses
(Oi	ficial Forn	1 1001.)					Tour exp	
4.		al or home owners s and any rent for the		ses for your residence. In r lot.	nclude first mortgage	4. \$	S	5,532.32
	If not inc	cluded in line 4:						
	4a. Re	eal estate taxes				4a. \$	5	0.00
		operty, homeowner's	s, or renter	's insurance		4b. \$		356.33
		ome maintenance, re				4c. \$		400.00
E		omeowner's associat			ma aquitulares	4d. \$		300.00
5.	Audition	iai mortyage payme	ants for yo	our residence, such as ho	me equity loans	5. \$)	3,414.00

	Shar E. Kanamouie Rachel Kanamouie	Case number (if known)		8:18-bk-14049-ES		
6. Utilitie s	·					
	lectricity, heat, natural gas	6a.	\$	600.00		
	Vater, sewer, garbage collection	6b.	\$	200.00		
	elephone, cell phone, Internet, satellite, and cable services	6c.		150.00		
	Other. Specify:	6d.	·	0.00		
	nd housekeeping supplies	7.	\$	600.00		
	are and children's education costs	8.	\$	0.00		
. Clothin	g, laundry, and dry cleaning	9.	\$	115.00		
	al care products and services	10.	\$	150.00		
	I and dental expenses	11.	\$	200.00		
	ortation. Include gas, maintenance, bus or train fare.					
	include car payments.	12.	\$	400.00		
3. Enterta	inment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00		
4. Charita	ble contributions and religious donations	14.	\$	50.00		
5. Insurar	nce.					
	include insurance deducted from your pay or included in lines 4 or 20.					
	ife insurance	15a.		0.00		
15b. F	lealth insurance	15b.	\$	0.00		
	ehicle insurance	15c.	\$	0.00		
15d. C	Other insurance. Specify: personal umbrella	15d.	\$	18.25		
l)	nsurance on daugther's car		\$	158.25		
6. Taxes. Specify	Do not include taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00		
	nent or lease payments:			0.00		
	Car payments for Vehicle 1	17a.	\$	0.00		
	Car payments for Vehicle 2	17b.		0.00		
	Other. Specify:	17c.		0.00		
	Other. Specify:	— 17d.	·	0.00		
	ayments of alimony, maintenance, and support that you did not report as		–	0.00		
	ed from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00		
	payments you make to support others who do not live with you.		\$	400.00		
-	Money for Sons dorm expenses and food	19.				
	eal property expenses not included in lines 4 or 5 of this form or on Sche	edule I: Yo	ur Income.			
	fortgages on other property	20a.		0.00		
20b. F	leal estate taxes	20b.	\$	0.00		
20c. F	roperty, homeowner's, or renter's insurance	20c.	\$	0.00		
	faintenance, repair, and upkeep expenses	20d.	\$	0.00		
	Iomeowner's association or condominium dues	20e.	\$	0.00		
1. Other:	Specify:	21.	+\$	0.00		
0-1						
	Ite your monthly expenses		æ	42.444.45		
	Id lines 4 through 21.		\$	13,144.15		
	py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$			
22c. Ac	d line 22a and 22b. The result is your monthly expenses.		\$	13,144.15		
	ate your monthly net income.	ı				
23a. C	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	10,396.08		
23b. C	copy your monthly expenses from line 22c above.	23b.	-\$	13,144.15		
	subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	\$	-2,748.07		
.4. Do you For exar	expect an increase or decrease in your expenses within the year after youngle, do you expect to finish paying for your car loan within the year or do you expect your			ease or decrease because of a		
	tion to the terms of your mortgage?					
No.						
☐ Yes.	Explain here:					

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Fill in this information	n to identify your cas	e:			
	har E. Kanamouie	Middle Name	Last Name		
1 11	achel Kanamouie	Middle Name	Last Name		
United States Bankrup	otcy Court for the:	ENTRAL DISTRICT OF CAL	IFORNIA		
Case number 8:18-	bk 14049 ES				
(if known)					Check if this is an amended filing
Official Form 10	06Dec				
Declaration	n About an	Individual De	btor's Sched	ules	12/15
If two married people	are filing together, b	oth are equally responsible	for supplying correct info	rmation.	
	roperty by fraud in co				nt, concealing property, or r imprisonment for up to 20
Sign Belo	ow .				
Did you pay or a	gree to pay someone	who is NOT an attorney to	help you fill out bankrupt	cy forms?	
₩ No					
Yes. Name	of person	=		_ '	cy Petition Preparer's Notice, Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and

Rachel Kanamouie

Signature of Debtor 2

Date November 17, 2018

Shar E. Kanamouie

Date November 17, 2018

Signature of Debtor 1

Fill	I in this information to ic	dentify your cas	se:			
De	btor 1 Shar E	. Kanamouie				
	First Name		Middle Name	Last Name		
1	ebtor 2 Rachel ouse if, filing) First Name	Kanamouie	Middle Name	Last Name		
` `	. 0,					
Un	ited States Bankruptcy Co	ourt for the:	CENTRAL DISTRICT OF	CALIFORNIA		
	sse number 8:18-bk-14	4049-ES				Check if this is an
	fficial Form 107	_	airs for Individ	luals Filing for B	ankruntev	4/1
					equally responsible for sup	
info		is needed, atta	ch a separate sheet to t		y additional pages, write you	
			 Status and Where You	Lived Before		
1.	What is your current m	narital status?				
	✓ MarriedNot married					
2.	During the last 3 years	have you live	d anywhere other than v	whore you live new?		
۷.	During the last 3 years	, nave you nvec	a anywhere other than v	where you live now :		
	✓ NoYes. List all of the p	olaces you lived	in the last 3 years. Do no	ot include where you live nov	<i>v</i> .	
	Debtor 1 Prior Addres	ss:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there
3. stat					ity property state or territory ico, Texas, Washington and W	
	No✓ Yes. Make sure you	u fill out <i>Schedu</i>	le H: Your Codebtors (Of	ficial Form 106H).		
Pa	rt 2 Explain the Sour	ces of Your Inc	come			
4.	Fill in the total amount of	f income you red	ceived from all jobs and a	g a business during this yell businesses, including parte together, list it only once ur		ndar years?
	✓ Yes. Fill in the deta	iils.				
		Del	btor 1		Debtor 2	
			urces of income eck all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	om January 1 of current e date you filed for bank	· . —	Wages, commissions, nuses, tips	\$60,000.00	✓ Wages, commissions, bonuses, tips	\$68,188.00
		✓	Operating a business		Operating a business	
	r last calendar year: anuary 1 to December 31	, 2017) bor	Wages, commissions, nuses, tips	Unknown	✓ Wages, commissions, bonuses, tips	\$83,160.00

Operating a business

Operating a business

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Debtor 1 Shar E. Kanamouie 8:18-bk-14049-ES Debtor 2 Rachel Kanamouie Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income Gross income Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For the calendar year before that: \$79,000.00 Wages, commissions, Unknown Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. Describe below. (before deductions each source (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an No. individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? ☐ No. Go to line 7. Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? ∐ No. Go to line 7. ✓ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. **Creditor's Name and Address** Dates of payment **Total amount** Amount you Was this payment for ... still owe paid **Wescom Credit Union** \$13,835.00 8/8/18, 9/12/18, \$1,150.00 Mortgage 123 S Marengo Ave 10/8/18 Car Pasadena, CA 91101 Credit Card Loan Repayment Suppliers or vendors Other **Wescom Credit Union** 8/25/18, 9/25/18, \$300.00 \$1,668.47 Mortgage 123 S Marengo Ave 10/25/18 Car Pasadena, CA 91101 Credit Card Loan Repayment

Suppliers or vendors

Other Line of credit

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8:18-bk-14049-ES Debtor 2 Rachel Kanamouie Case number (if known) Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No **V** Yes. List all payments to an insider. **Insider's Name and Address** Dates of payment Total amount Amount you Reason for this payment paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address **Total amount** Amount you Reason for this payment Dates of payment paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο **√** Yes. Fill in the details. Status of the case Case title Nature of the case Court or agency Case number NextGear Capital Inc v. Ragalish, Collection **Orange County Superior** Pending Inc, dba Prestige Motor Imports: Court On appeal Shar E Kanamouie and Rachel 700 Civic Center Drive West Concluded Kanamouie Santa Ana, CA 92701 30-2017-00936208-CU-BC-CJC 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes

Debtor 1

Shar E. Kanamouie

	otor 1 Shar E. Kanamouie Rachel Kanamouie		Case number (if known)	8:18-bk-14049-ES
Par	t 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankrup No Yes. Fill in the details for each gift.	ptcy, did you give any gifts with	a total value of more than \$60	0 per person?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates the g	s you gave Value ifts
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankrup No Yes. Fill in the details for each gift or cor		ontributions with a total value	of more than \$600 to any charity?
	Gifts or contributions to charities that too more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)			s you Value ributed
Par	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankrupt or gambling?	tcy or since you filed for bankru	ptcy, did you lose anything be	ecause of theft, fire, other disaster
	✓ No Yes. Fill in the details.			
	how the loss occurred	Describe any insurance coverage nounce the amount that insurance nsurance claims on line 33 of Sch	has paid. List pending loss	of your Value of property lost
Par	t 7: List Certain Payments or Transfers			
16.	Within 1 year before you filed for bankrupt consulted about seeking bankruptcy or present include any attorneys, bankruptcy petition present include any attorneys, bankruptcy petition present include any attorneys, bankruptcy petition present include any attorneys.	eparing a bankruptcy petition?		
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value o transferred		payment Amount of unsfer was payment
	Arya Law Center 3187 Red Hill Avenue, Ste 115 Costa Mesa, CA 92626		11-2·	-2018 \$1,950.00
17.	Within 1 year before you filed for bankrupt promised to help you deal with your credit Do not include any payment or transfer that you	tors or to make payments to yo		fer any property to anyone who
	✓ No Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value o transferred		payment Amount of insfer was payment

Der	btor 2 Rachel Kanamouie			Case num	ber (if known)	8:18-bk-1	4049-ES
18.	Within 2 years before you filed for bankruptc transferred in the ordinary course of your bu Include both outright transfers and transfers mad include gifts and transfers that you have already	siness or financial aff de as security (such as	fairs? the granting of	, ,	. ,	• •	,
	✓ NoYes. Fill in the details.						
	Person Who Received Transfer Address	Description and property transfer		payme	ibe any prop ents receive n exchange		Date transfer was made
	Person's relationship to you			paid ii	rexendinge		
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prot No Yes. Fill in the details.		ny property to	a self-settled	d trust or si	milar device	of which you are a
	Name of trust	Description and	value of the pro	operty trans	ferred		Date Transfer was
			·	•			made
Par	t 8: List of Certain Financial Accounts, Inst	truments, Safe Depos	it Boxes, and S	torage Unit	s		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No Yes. Fill in the details.	other financial accou	ınts; certificate	s of deposit	•	,	,
	Name of Financial Institution and	Last 4 digits of account number	Type of acco	ount or	Date according to the control of the	ld,	Last balance before closing o transfe
21.	Do you now have, or did you have within 1 ye cash, or other valuables? No Yes. Fill in the details.	ear before you filed fo	r bankruptcy, a	any safe dep	oosit box or	other depos	sitory for securities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe t	the content	S	Do you still have it?
22.	Have you stored property in a storage unit or	r place other than you	r home within	1 year befor	e you filed f	or bankrupt	cy?
	✓ No Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe t	the content	s	Do you still have it?
Par	rt 9: Identify Property You Hold or Control f	or Someone Else					
23.	Do you hold or control any property that som for someone.	neone else owns? Inc	lude any prope	rty you borr	owed from,	are storing	for, or hold in trust
	✓ No✓ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe t	the property	1	Value
Par	rt 10: Give Details About Environmental Info	rmation					
For	the purpose of Part 10, the following definition	ns apply:					
y	Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these site means any location, facility, or property	e air, land, soil, surfac substances, wastes, o	ce water, groun or material.	dwater, or o	ther mediu	m, including	statutes or

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

Shar E. Kanamouie

Debtor 1

page 5

to own, operate, or utilize it, including disposal sites. **Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic subhazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environment No.	·
24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environment No	tal law?
v No	tal law?
Yes. Fill in the details.	
Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it ZIP Code)	Date of notice
25. Have you notified any governmental unit of any release of hazardous material?	
✓ No ✓ Yes. Fill in the details.	
Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it	Date of notice
26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and	d orders.
✓ NoYes. Fill in the details.	
	Status of the case
Part 11: Give Details About Your Business or Connections to Any Business	
27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business or have any of the following connections are also because the following connections ar	usiness?
A partner in a partnership	
An officer, director, or managing executive of a corporation	
An owner of at least 5% of the voting or equity securities of a corporation	
No. None of the above applies. Go to Part 12.	
 ✓ Yes. Check all that apply above and fill in the details below for each business. Business Name Describe the nature of the business Employer Identification number 	
Address Do not include Social Security nur	mber or ITIN.
(Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed	
Raqalish Inc dba Prestige Motor Car Dealership EIN: 33-0817830 Imports	
1211 W. Imperial Hwy Suite 100 From-To August 3, 1998-prese Brea, CA 92821	ent
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include institutions, creditors, or other parties.	e all financial
✓ No Yes. Fill in the details below.	
Name Date Issued Address	
(Number, Street, City, State and ZIP Code) Part 12: Sign Below	

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection

Debtor 1 Shar E. Kanamouie Debtor 2 Rachel Kanamouie	Case nur	mber (if known) 8:18-bk-14049-ES						
with a bankruptcy case can result in fines up to \$2.18 U.S.C. \$\$\frac{152}{1341}, 1519, and 3571. Shar E. Kanamouie Signature of Debtor 1	Rachel/Kanamouie Signature of Debtor 2	both.						
Date November 17, 2018	Date November 17, 2018							
Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes								
Did you pay or agree to pay someone who is not a	an attorney to help you fill out bankruptcy form	ns?						
1	tcv Petition Preparer's Notice, Declaration, and Si-	gnature (Official Form 119).						

F::: 41 · · ·	or a second						
Fill in this inf	ormation to identify your case:			eck one box only as o	directed	d in this form and	in Form
Debtor 1	Shar E. Kanamouie			2A-1Supp:			
Debtor 2	Rachel Kanamouie		[1. There is no pres	sumptio	on of abuse	
(Spouse, if filing) United State	s Bankruptcy Court for the: Central District of C	California	[2. The calculation applies will be a Calculation (Of	made u	inder Chapter 7	mption of abuse <i>Means Test</i>
Case numbe	8:18-bk-14049-ES			3. The Means Tes	t does		
				Check if this is	•		1 7
Official	Form 122A - 1						
Chapte	r 7 Statement of Your Cur	rent Mo	nthly Inc	ome			12/1
attach a separ case number (qualifying mili	e and accurate as possible. If two married people a ate sheet to this form. Include the line number to w if known). If you believe that you are exempted fror tary service, complete and file Statement of Exemp Calculate Your Current Monthly Income	hich the additio n a presumptior	nal information an of abuse becau	ipplies. On the top of a se you do not have pri	ny addi marily o	itional pages, writ consumer debts o	te your name and or because of
_	s your marital and filing status? Check one on	ly.					
	married. Fill out Column A, lines 2-11.						
	ried and your spouse is filing with you. Fill ou		*	2-11.			
	ried and your spouse is NOT filing with you.	-	-				
	iving in the same household and are not lega	-					
p	iving separately or are legally separated. Fill of enalty of perjury that you and your spouse are lead in the service of the very service of the evading apart for reasons that do not include evading the service of t	egally separate	d under nonban	kruptcy law that appli	es or tl		
101(10A). F the 6 month	average monthly income that you received from all strong example, if you are filing on September 15, the 6-mins, add the income for all 6 months and divide the total on the same rental property, put the income from that p	onth period would by 6. Fill in the re	d be March 1 throu esult. Do not includ	ugh August 31. If the am de any income amount n	ount of y	your monthly incom n once. For examp	ne varied during le, if both
				Column A Debtor 1	Deb	umn B tor 2 or -filing spouse	
	ross wages, salary, tips, bonuses, overtime, a deductions).	and commissi	ons (before all	\$ 6,000.00	\$	7,400.00	
	y and maintenance payments. Do not include a B is filled in.	payments from	a spouse if	\$ 0.00	\$	0.00	
of you from an and roo	counts from any source which are regularly pa or your dependents, including child support. I unmarried partner, members of your household immates. Include regular contributions from a sp Include Down to the contributions from a sp	Include regula , your depende	r contributions ents, parents,	\$ 0.00	\$	0.00	
	ome from operating a business, profession,	or farm					
		Del	otor 1				
Gross r	eceipts (before all deductions)	\$ 0.00	-				
Ordinar	y and necessary operating expenses	-\$ 0.00	=				
Net mo	nthly income from a business, profession, or farr	n \$ 0.00	Copy here ->	\$	\$	0.00	
6. Net inc	ome from rental and other real property		htau 4				
		\$ 0.00	btor 1				
	eceipts (before all deductions)	\$ 0.00 -\$ 0.00	-				
	y and necessary operating expenses	·	Copy here ->	\$ 0.00	\$	0.00	
ivet mo	nthly income from rental or other real property	\$ 0.00	20PJ 11010 ->	Ψ 0.00	Ψ	0.00	

0.00

7. Interest, dividends, and royalties

0.00

Shar E. Kanamouie Rachel Kanamouie		Case number (if known)	8:18-bk-14049	-ES
Case 8:18-bk-14049-ES	Filed 11/ ocument		18 21:06:31	Desc

			Column A Debtor 1		Column B Debtor 2 o non-filing		
Unemployment compensation			\$	0.00	\$	0.00	
	received was a ben	efit under					
•	C	0.00					
		0.00					
	nount received that w	as a	\$	0.00	\$	0.00	
Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hun	Security Act or paymental analytic national security, or international security.	ents al or	•	0.00	•	0.00	
•			\$		· 		
			\$		· —		
Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
		\$	6,000.00	+ -	7,400.00	= \$	13,400.00
2: Determine Whether the Means Test Applies to	o You						current monthly e
Calculate your current monthly income for the year.	Follow these steps:						
			Сору	y line 11	here=>	\$	13,400.00
Multiply by 12 (the number of months in a year)							
12b. The result is your annual income for this part of the	e form				12b	o. \$1	60,800.00
Calculate the median family income that applies to	you. Follow these ste	eps:					
Fill in the state in which you live.	CA						
Fill in the number of people in your household.	3						
To find a list of applicable median income amounts, go	online using the link	specified	in the separa	ate instru	••	\$	82,000.00
How do the lines compare?							
	n the top of page 1, o	heck box	1, There is r	no presui	mption of abus	se.	
_	of page 1, check box	2, The pro	esumption of	abuse is	determined b	y Form 1.	22A-2.
3: Sign Below							
X Shar E. Kanamouie Signature of Debtor 1 Date November 17, 2018 MM / DD / YYYY If you checked line 14a, do NOT fill out or file Form	Date 122A-2.	Rackfel Signature Novem	Kanamoui e of Debtor 2 ber 17, 201		tachments is t	rue and c	orrect.
	the Social Security Act. Instead, list it here: For you \$ For your spouse \$ Pension or retirement income. Do not include any ambenefit under the Social Security Act. Income from all other sources not listed above. Spe Do not include any benefits received under the Social Sreceived as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below. Total amounts from separate pages, if any. Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total column. Then add the total for Column A to the total current monthly income for the year. 12a. Copy your total current monthly income from line 1 Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of the calculate the median family income that applies to the calculate the median family income that applies to the calculate the median family income that applies to the calculate the median family income for your state and size. To find a list of applicable median income amounts, go for this form. This list may also be available at the bank thow do the lines compare? 14a. Line 12b is less than or equal to line 13. On Go to Part 3. 14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2. 3: Sign Below By signing here, I deplace under penalty of perjury X Sign Below By signing here, I deplace under penalty of perjury X Sign Below November 17, 2018 MM / DD / YYYY If you checked line 14a, do NOT fill out or file Form	Do not enter the amount if you contend that the amount received was a benthe Social Security Act. Instead, list it here: For you \$ Contend of the Social Security Act. Instead, list it here: For your spouse \$ Contend of the Social Security Act. Income from all other sources not listed above. Specify the source and a Do not include any benefits received under the Social Security Act or payme received as a victim of a war crime, a crime against humanity, or international domestic terrorism. If necessary, list other sources on a separate page and total below. Total amounts from separate pages, if any. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 2: Determine Whether the Means Test Applies to You Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of the form Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. CA Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link for this form. This list may also be available at the bankruptcy clerk's office. How do the lines compare? 14a.	Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you \$\ 0.00\$ Per your spouse \$\ 0.00\$ Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. Total amounts from separate pages, if any. **Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. **Determine Whether the Means Test Applies to You **Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of the form **Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. **Calculate the median family income that applies to you. Follow these steps: Fill in the number of people in your household. To find a list of applicable median income amounts, go online using the link specified for this form. This list may also be available at the bankruptcy clerk's office. How do the lines compare? 14a.	Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you \$ 0.00 For your spouse \$ 0.00 Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11	Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you \$ 0.00 For your spouse \$ 0.00 Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. \$ 0.00 Total amounts from separate pages, if any. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 2. Determine Whether the Means Test Applies to You Calculate your current monthly income from line 11	Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you S 0.00 Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act. Or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. S 0.00 Total amounts from separate pages, if any. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Multiply by 12 (the number of months in a year) 12b. The result is your annual income for this part of the form 12t Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. CA Fill in the median family income for your state and size of household. 3 Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. How do the lines compare? 14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse is determined by Core Part 3. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Core Part 3 and fill out Form 122A-2. Sign Below By starting the presumption of page 1, check box 2, The presumption of abuse is determined by Core Part 3 and fill out Form 122A-2. Sign Below By starting the presump	Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you S 0.00 For your spouse S 0.00 Persion or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Income from all other sources not listed above. Specify the source and amount. Do not include any benefit received under the Social Security Act or payments received as and lother sources not listed above. Specify the source and amount. Do not include any benefits received as a widtle of a war crief, a critine against humanity or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. S 0.00 \$ 0.00 Total amounts from separate pages, if any. Total amounts from separate pages, if any. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income for the year. Follow these steps: 12b. The result is your annual income for this part of the form 12c. The result is your annual income for this part of the form 12c. The result is your annual income for this part of the form 12c. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. How do the lines compare? 14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 1. Go to Part 3. 14b. Line 12b is less than or equal to line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 1. Go to Part 3. 14b. Line 12b is less than or equal to line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 1. Go to Part 3. 15 Jan Below By signature of Debtor

Debtor 1 Debtor 2

	Main Document P	age 34 of 42
Fill in this information	on to identify your case:	Check the appropriate box as directed in lines 40 or 42:
Debtor 1 Sha	r E. Kanamouie	
Debtor 2 Racl	hel Kanamouie	According to the calculations required by this Statement:
United States Bankru	ptcy Court for the: Central District of California	
Case number 8:18	-bk-14049-ES	2. There is a presumption of abuse.
O#: -: -! F	4004 0	Check if this is an amended filing
Official Form		
Chapter 7 M	leans Test Calculation	04/16
additional pages, wri	ach a separate sheet to this form, Include the line number ite your name and case number (if known). ne Your Adjusted Income	to which additional information applies. On the top any
1. Copy your total	current monthly income. Copy line 11 fr	om Official Form 122A-1 here=> \$ 13,400.00
2. Did you fill out	Column B in Part 1 of Form 122A-1?	
☐ No. Fill in \$0	0 for the total on line 3.	
✓ Yes. Is your:	spouse Filing with you?	
☐ No. G	Go to line 3.	
✓ Yes. F	fill in \$0 for the total on line 3.	
	rrent monthly income by subtracting any part of your spo enses of you or your dependents. Follow these steps:	use's income not used to pay for the
	mn B of Form 122A–1, was any amount of the income you re or your dependents?	ported for your spouse NOT regularly used for the household
✓ No. Fill in 0	for the total on line 3.	
	ne information below:	
State eac	h nurnose for which the income was used	Fill in the amount you

4. Adjust your current monthly income. Subtract line 3 from line 1.

support other than you or your dependents.

For example, the income is used to pay your spouse's tax debt or to

Total.

13,400.00

Copy total here=>... - \$ 0.00

are subtracting from your spouse's income

0.00

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Debtor 1 Debtor 2 Rachel Kanamouie

Case number (if known)

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Part 2: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

3

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$ 1,384.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

- 7a. Out-of-pocket health care allowance per person \$ _______
- 7b. Number of people who are under 65 X **3**
- 7c. Subtotal. Multiply line 7a by line 7b. \$ 156.00 Copy here=> \$ 156.00

People who are 65 years of age or older

- 7d. Out-of-pocket health care allowance per person \$ 114
- 7e. Number of people who are 65 or older X ______0
- 7f. Subtotal. Multiply line 7d by line 7e. \$ 0.00 Copy here=> +\$ 0.00
- 7g. Total. Add line 7c and line 7f \$ ______ \$ ____ \$ ____ Copy total here=> \$ _____ 156.00

Debtor 1 Debtor 2 Shar E. Kanamouie Rachel Kanamouie Case number (if known) 8:18-bk-14049-ES

Loc	al St	andards You must use the IRS Local Standards to ans	wer the	questions in line	es 8-15.				
	Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:								
	 ✓ Housing and utilities - Insurance and operating expenses ✓ Housing and utilities - Mortgage or rent expenses 								
То	answ	er the questions in lines 8-9, use the U.S. Trustee Pro	gram c	hart.					
	To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.								
8.	8. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses								
9.	Hou	ising and utilities - Mortgage or rent expenses:							
	9a.	Using the number of people you entered in line 5, fill in listed for your county for mortgage or rent expenses			\$2,403.00				
	9b.	Total average monthly payment for all mortgages and o	ther deb	ots secured by y	our home.				
	To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.								
		Name of the creditor	Avera	ge monthly ent					
		Mr. Cooper	\$	5,532.32					
		Wells Fargo Home Equity	_ \$	3,414.00					
		Total average monthly payment	\$	8,946.32	Copy here=> -\$ 8,946.32 Repeat this amount on line 33a.				
	9c.	Net mortgage or rent expense.							
		Subtract line 9b (total average monthly payment) from li or rent expense). If this amount is less than \$0, enter \$0			\$	0.00			
10.		ou claim that the U.S. Trustee Program's division of the calculation of your monthly expenses, fill in a				0.00			
	Ex	plain why:							
11.	Loc	al transportation expenses: Check the number of vehic	cles for \	which you claim	an ownership or operating expense.				
		D. Go to line 14.							
	√	1. Go to line 12.							
		2 or more. Go to line 12.							
12.		icle operation expense: Using the IRS Local Standards rating expenses, fill in the Operating Costs that apply for				289.00			

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	payment		
	\$		
Total Average Monthly Payment	\$	Copy here => -\$	0.00 Repeat this amount on line 33c.

13f. Net Vehicle 2 ownership or lease expense

Subtract line 13e from line 13d. if this amount is less than \$0, enter \$0.

\$	0.00	Copy net Vehicle 2 expense here => \$	0.00
•		nere => \$	0.00

14. **Public transportation expense:** If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the *Public Transportation* expense allowance regardless of whether you use public transportation.

\$ 0.00

15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for *Public Transportation*.

0.00

Debtor 1 Debtor 2 Shar E. Kanamouie
Rachel Kanamouie
Case number (if known)
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Oth	•	In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	for	
16.	self-employment taxes, soci your pay for these taxes. Ho	nount that you will actually owe for federal, state and local taxes, such as income taxes, all security taxes, and Medicare taxes. You may include the monthly amount withheld from owever, if you expect to receive a tax refund, you must divide the expected refund by 12 orm the total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, s	ales, or use taxes.	\$	0.00
17.	Involuntary deductions: To contributions, union dues, a	he total monthly payroll deductions that your job requires, such as retirement nd uniform costs.		
	Do not include amounts that	t are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	0.00
18.	filing together, include paym	nonthly premiums that you pay for your own term life insurance. If two married people are nents that you make for your spouse's term life insurance. Do not include premiums for life ints, for a non-filing spouse's life insurance, or for any form of life insurance other than	\$	0.00
19.		The total monthly amount that you pay as required by the order of a court or as spousal or child support payments.		
	Do not include payments on	past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total month as a condition for your jo	ly amount that you pay for education that is either required: b, or		0.00
	for your physically or me	ntally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total monthl	y amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.	•	0.00
	Do not include payments for	rany elementary or secondary school education.	\$	0.00
22.	that is required for the healt	nenses, excluding insurance costs: The monthly amount that you pay for health care the and welfare of you or your dependents and that is not reimbursed by insurance or paid include only the amount that is more than the total entered in line 7.		
	Payments for health insurar	ice or health savings accounts should be listed only in line 25.	\$	0.00
23.	for you and your dependent	lephone services: The total monthly amount that you pay for telecommunication services s, such as pagers, call waiting, caller identification, special long distance, or business cell necessary for your health and welfare or that of your dependents or for the production of by your employer.		
		basic home telephone, internet and cell phone service. Do not include self-employment ported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$	0.00
24.	Add all of the expenses al Add lines 6 through 23.	lowed under the IRS expense allowances.	\$	2,434.00

Debtor 1 Debtor 2 Rachel Kanamouie

Case number (if known)

Case number (if known)

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Add	itional Expense Deductions These are additional dedu	uctions allowed by the	ne Means Test.				
	Note: Do not include any e	expense allowances	s listed in lines 6-24.				
25.	Health insurance, disability insurance, and health savir insurance, disability insurance, and health savings account your dependents.	-	, ,				
	Health insurance	\$0.00					
	Disability insurance	\$0.00_					
	Health savings account + 5	\$0.00_					
	Total	\$0.00	Copy total here=>	\$	0.00		
	Do you actually spend this total amount?						
	No. How much do you actually spend?✓ Yes	\$					
26.	Continued contributions to the care of household or far continue to pay for the reasonable and necessary care and your household or member of your immediate family who is include contributions to an account of a qualified ABLE prog	d support of an elder s unable to pay for s	ly, chronically ill, or disabled member of such expenses. These expenses may	\$	0.00		
27.	Protection against family violence. The reasonably nece safety of you and your family under the Family Violence Pro	essary monthly experevention and Service	nses that you incur to maintain the es Act or other federal laws that apply.				
	By law, the court must keep the nature of these expenses of	confidential.		\$	0.00		
28.	Additional home energy costs. Your home energy costs line 8.	are included in your	insurance and operating expenses on				
	If you believe that you have home energy costs that are mo 8, then fill in the excess amount of home energy costs.	ore than the home e	nergy costs included in expenses on line				
	You must give your case trustee documentation of your act amount claimed is reasonable and necessary.	tual expenses, and	you must show that the additional	\$	0.00		
29.	Education expenses for dependent children who are yo \$160.42* per child) that you pay for your dependent childre public elementary or secondary school.						
	You must give your case trustee documentation of your act claimed is reasonable and necessary and not already acco						
	* Subject to adjustment on 4/01/19, and every 3 years after	r that for cases begu	un on or after the date of adjustment.	\$	0.00		
30.	30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.						
	To find a chart showing the maximum additional allowance, instructions for this form. This chart may also be available a						
	You must show that the additional amount claimed is reason	onable and necessa	ry.	\$	0.00		
31.	Continuing charitable contributions. The amount that yo instruments to a religious or charitable organization. 26 U.S.			+\$	0.00		
32.	Add all of the additional expense deductions. Add lines 25 through 31.			\$	0.00		

Debtor 1 Debtor 2 Shar E. Kanamouie Rachel Kanamouie Case number (if known) 8:18-bk-14049-ES

Dedu	ctions for Debt Payment						
	or debts that are secured by an interest cans, and other secured debt, fill in line		me mo	ortgaç	ges, vehicle		
	o calculate the total average monthly payn reditor in the 60 months after you file for ba		ly due t	o eac	h secured		
	Mortgages on your home:						verage monthly syment
33a.	Copy line 9b here				=>	\$	8,946.32
	Loans on your first two vehicles:						
33b.	Copy line 13b here				=>	• \$	0.00
33c.						• \$	0.00
33d.	List other secured debts:						
Name	of each creditor for other secured debt	Identify property that secures the debt			Does payment include taxes or insurance?	,	
					□ No		
	-NONE-				☐ Yes	\$	
					∐ No		
						\$	
					☐ No		
					Yes	+\$	
		-					
						Copy total	
33e.	Total average monthly payment. Add line	s 33a through 33d	. \$		8,946.32	here=>	\$8,946.32
	Yes. State any amount that you must p	port or the support of your dependents bay to a creditor, in addition to the payment on of your property (called the cure amount	s?				
Nam	e of the creditor	dentify property that secures the debt			Total cure amount		Monthly cure amount
-NC	DNE-			\$	÷	60 = \$	
				_	·	•	
						Сору	
		Т	otal \$		0.00	total here=>	\$ 0.00
						11616-2	
	o you owe any priority claims such as a		- that				
	No. Go to line 36.						
¥		ese priority claims. Do not include current coose you listed in line 19.	or				
	Total amount of all past-due price	ority claims	\$		236,847.01 ÷	60 =	\$3,947.45

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Debtor 1 Debtor 2		r E. Kanamouie hel Kanamouie			Case n	umber (<i>if known</i>)	8:18-bk	-14049-ES
Fo	r more	eligible to file a case under Chapter information, go online using the link f ins for this form. Bankruptcy Basics ma	or Bankruptcy Basid	cs specified				
✓		Go to line 37. Fill in the following information.						
		Projected monthly plan payment if yo	ou were filing under	Chapter 13	\$			
		Current multiplier for your district as Administrative Office of the United S and North Carolina) or by the Execut (for all other districts).	tates Courts (for dis	tricts in Ala				
		To find a list of district multipliers that the link specified in the separate inst be available at the bankruptcy clerk's	ructions for this forn				Сору	total
		Average monthly administrative expe	ense if you were filin	ig under Ch	apter 13	\$		=> \$
		of the deductions for debt paymenes 33e through 36.	t.					\$12,893.77
Total	Deduc	tions from Income						
38. Ac	dd all c	of the allowed deductions.						
		ne 24, All of the expenses allowed und e allowances		\$	2,434.00			
C	Copy lin	ne 32, All of the additional expense de	ductions	\$	0.00			
C	Copy lin	ne 37, All of the deductions for debt pa	yment	+\$	12,893.77	٦		
		Т	otal deductions	\$	15,327.77	Copy total he	ere=>	\$ 15,327.77
Part 3:	Det	termine Whether There is a Presum	ption of Abuse					
39. C a	alculat	e monthly disposable income for 60) months					
3	9a. Co	ppy line 4, adjusted current monthly ind	come	\$	13,400.00			
3	9b. Co	ppy line 38, Total deductions		- \$	15,327.77	_		
3		onthly disposable income. 11 U.S.C. § obtract line 39b from line 39a	707(b)(2).	\$	-1,927.77	Copy here=>\$	1	,927.77
F	or the	next 60 months (5 years)					x 60	
3	9d. To	otal. Multiply line 39c by 60		39d.	\$11	5 666 7N	Copy nere=>	\$115,666.20
40. Fi i	nd out	whether there is a presumption of	abuse. Check the b	ox that app	lies:			
✓	The I	ine 39d is less than \$7,700*. On the	top of page 1 of this	s form, ched	ck box 1, There	is no presum	ption of abo	use. Go to Part 5.
		ine 39d is more than \$12,850*. On the 4 if you claim special circumstances.		his form, ch	neck box 2, The	ere is a presur	nption of al	buse. You may fill out
	The I	line 39d is at least \$7,700*, but not r	nore than \$12,850*	Go to line	41.			
*S	ubject	to adjustment on 4/01/19, and every 3	years after that for	cases filed	on or after the	date of adjust	ment.	

Debtor 1

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ebtor 1 ebtor 2		r E. Kanamouie nel Kanamouie	Case number (if	known) 8:1	8-bk-140	49-ES
41.	41 a.	Fill in the amount of your total nonpriority unsecured debt. If you fill A Summary of Your Assets and Liabilities and Certain Statistical Informa Schedules (Official Form 106Sum), you may refer to line 3b on that form	ation	.25		
	41h	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(/	A)(i)(l) \$		Copy here=>	\$
	710.	Multiply line 41a by 0.25			nere-/	
25	% of y	ne whether the income you have left over after subtracting all allowed our unsecured, nonpriority debt. e box that applies:	d deductions is	enough to p	pay	
		39d is less than line 41b. On the top of page 1 of this form, check box 1, part 5.	, There is no pres	sumption of a	buse.	
		39d is equal to or more than line 41b. On the top of page 1 of this form, amption of abuse. You may fill out Part 4 if you claim special circumstance				
art 4:	Giv	ve Details About Special Circumstances				
	Yo	m. You may include expenses you listed in line 25. ou must give a detailed explanation of the special circumstances that make cessary and reasonable. You must also give your case trustee documental justments.				
	G	tive a detailed explanation of the special circumstances	Average mo	onthly exper	ise	
			\$			
			\$			
			\$			
			\$			
		ın Below	4910 Staffe for four substantial		Philosophia	
art 5:		ghird, here I declare under penalty of perjury that the information on this s	statement and in	any attachm	ents is true	and correct.
	x 6	X X	Suchel !	1/0/		
	\$	nar F. Kanamouie Rache	el Kanamouie	1		14
Da			ure of Debtor 2 mber 17, 2018			
			DD / YYYY			